

The person relieving the nurse should have a couple of loose cotton wrappers and dusting caps. She should wear short under-skirts of washable material, and when leaving the room should doff wrapper and cap and leave her shoes just inside the door. The wrapper and cap should be disinfected and sent to the laundry.

It must be borne in mind that the discharges from the nose and throat, in most contagious diseases, are among the greatest menaces. Flying flakes, from uncovered dried discharges, are very active factors in spreading disease. Small squares of linen, or old muslin, or Japanese paper napkins, which are easily and cheaply obtained, should be used for such excreta and put into paper cornucopias made with several thicknesses of paper, so that one or more thicknesses can be doubled in as a cover. This, and all other refuse, should be consigned to the covered bucket for removal to the furnace. A basin of some antiseptic solution should be kept just inside the doorway for washing the hands before leaving the room. Lysol, four-per-cent., will be found very satisfactory.

A cap, that completely covers the hair, is an essential in contagious cases. What is known as the Puritan dusting cap is perhaps a little more attractive than the old-time round shape.

The subject of disinfection after a case need not be considered here, as it has been adequately dealt with in former numbers of the JOURNAL.

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## NURSING ETHICS AND ETIQUETTE\*

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(Continued from page 452.)

*Truthfulness.*—Of all the moral attributes, truthfulness is one which places us most on our honor. To the upright man, nothing is so heinous as any deviation from the truth. There are special professional reasons why nurses should practice strict observance of the rule of careful statement. A nurse's life is complex, full of varied duties and situations which call for ingenuity and tact, as well as for adherence to the truth. She administers powerful drugs, watches im-

\*Lecture given to the pupil-nurses of Faxton Hospital.

portant symptoms, becomes acquainted with facts often having a bearing on circumstantial evidence. She may be called upon to help trace out an intricate cause of disease or fatal termination. Under the strain of excessive activity she may commit an error, any attempt to cover up which might result disastrously to the patient. A mistake should, therefore, be promptly reported to the proper authority. The physician will depend upon the accuracy of a nurse's reporting of *facts*, not opinions, for his diagnosis. Her constant attendance upon the sick yields an opportunity for collecting important data which he can obtain in no other way. The habit of concise practical statement, expressed in technical language, adds greatly to a nurse's influence and professional prestige.

Trustworthiness refers primarily to the keeping as a sacred confidence all that is revealed, whether intentionally or inadvertently, concerning the patient's circumstances, condition, past history, family relations, or nature of disease and treatment. It is in violation of this ethical rule that nurses talk over these matters, even among themselves, in their rooms, at table, in the corridors of the hospital, in public thoroughfares, drug stores, or any place where they may be overheard. Once a matter is imparted to another, it is no longer a sacred confidence. Better always to practice a discreet silence in all things relating to a patient than to merit a lack of confidence on the part of the laity. Once aware of a nurse's broken faith and tendency to gossip, patients will not only shun that nurse, but will see to it that their friends are warned. Trustworthiness also enters into the character of a nurse's work. She must be perfectly reliable as to surgical cleanliness, watchful care of the patient, observation of symptoms, faithful execution of orders, conscientious use of appliances and hospital furnishings, safe storing of patient's belongings; for maintaining a loyal attitude toward the training-school, and for being a wholesome example to her class mates. In matters of conduct, nurses should remember that they are mature women who have adopted a serious profession; not youthful girls, full of irrepressible spirits, who so far forget their calling as to throw off all restraint. A certain reserve of manner should never be entirely lost. A discrimination should be shown, not only towards differences in rank, but between affairs professional and social. Trustworthiness in this respect would relieve those in authority of needless anxiety, and make the hospital atmosphere one of harmony and sympathetic coöperation in the care of the sick.

(To be continued.)